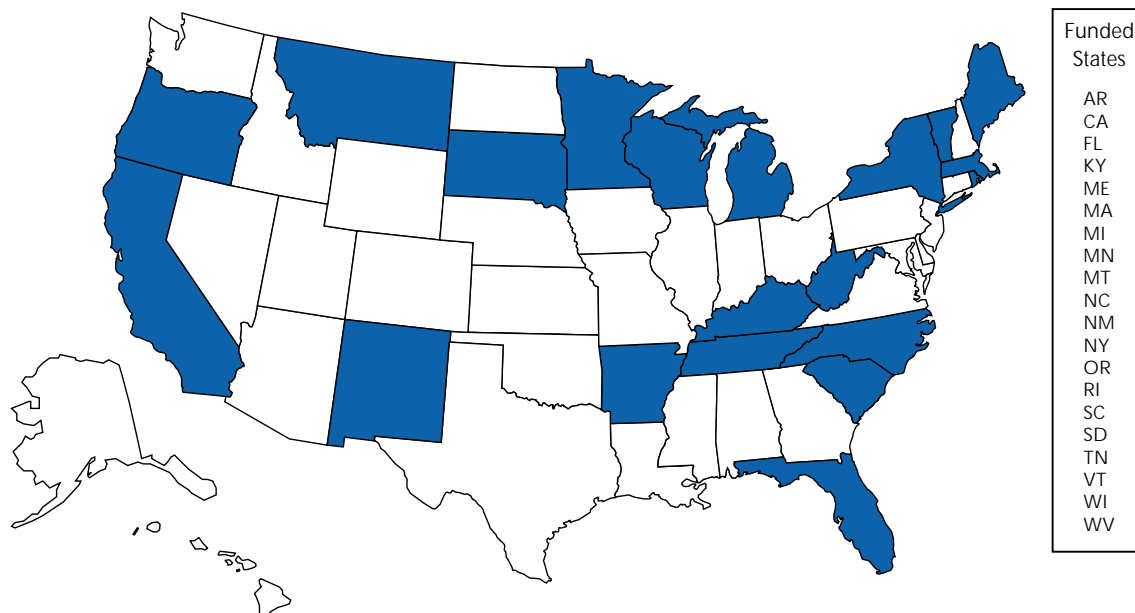


# School Health Programs: An Investment in Our Nation's Future 2001

**States Funded by CDC for Coordinated School Health Programs**



*"Schools could do more than perhaps any other single institution in society to help young people, and the adults they will become, to live healthier, longer, more satisfying, and more productive lives."*

*Carnegie Council on Adolescent Development*

## Health Challenges of Young People

Many of the health challenges facing young people today are different from those of past decades. Advances in medications and vaccines have largely addressed the illness, disability, and death that common infectious diseases once caused among children.

Today, the health of young people, and the adults they will become, is critically linked to the health-related behaviors they choose to adopt.

### Damaging Behaviors

Certain behaviors that are often established during youth contribute markedly to today's major killers, such as heart disease, cancer, and injuries. These behaviors include

- Tobacco use.
- Unhealthy dietary behaviors.
- Inadequate physical activity.
- Alcohol and other drug use.
- Sexual behaviors that can result in HIV infection, other sexually transmitted diseases, and unintended pregnancies.
- Behaviors that may result in violence and unintentional injuries (motor vehicle crashes).

These behaviors place young people at significantly increased risk for serious health problems, both now and in the future.

#### Young People Are at Risk

- ▶ Every day, nearly 3,000 young people take up daily smoking.
- ▶ Daily participation in high school physical education classes dropped from 42% in 1991 to 29% in 1999.
- ▶ Almost three-fourths of young people do not eat the recommended number of servings of fruits and vegetables.
- ▶ Every year, almost 1 million adolescents become pregnant, and about 3 million become infected with a sexually transmitted disease.

## School Health Education Proven Effective

Every school day, 53 million young people attend nearly 117,000 schools across our nation. Because of the size and accessibility of this population, school health programs are one of the most efficient means of shaping our nation's future health and social well-being.

Rigorous studies show that health education in schools can effectively reduce the prevalence of health risk behaviors among young people. For example,

- Planned, sequential health education resulted in a 37% reduction in the onset of smoking among seventh-grade students.
- The prevalence of obesity decreased among girls in grades 6–8 who participated in a school-based intervention program.
- Students who participated in a school-based life skills training program were less likely to use tobacco, alcohol, or marijuana than were students not enrolled in the program.

In 1998, Congress emphasized the opportunity afforded by our nation's schools when it urged CDC to "expand its support of coordinated health education programs in schools." Gallup polls have shown strong parent, teacher, and public support for school health education.

Enthusiasm for addressing health among young people has grown in the private sector as well. National health and education organizations, including the American Medical Association, the American Cancer Society, and the National Association of State Boards of Education, actively endorse a coordinated approach to health education in the school setting.

## CDC Program Elements

In 1987, in response to the growing impact of HIV infection, CDC began providing funds and technical assistance for state and large-city education agencies to help schools implement effective HIV prevention education. In 1992, the U.S. House of Representatives Appropriations Committee commended CDC for its approach to providing HIV/AIDS prevention education in the nation's schools and expressed a desire for school children to be encouraged to adopt healthy lifestyles in other areas. The Committee's recommendations state, "The time to prevent health-damaging behavior patterns is before they are established; comprehensive health education in schools takes advantage of that."

In 1992, while continuing to provide funding to all states for HIV prevention education, CDC started a new initiative to support coordinated school health programs that can reduce chronic disease risk factors: poor eating habits, physical inactivity, and tobacco use. CDC currently supports 20 states for coordinated school health programs.

### National Framework

CDC has established a national framework to support coordinated school health programs. More than 40 national nongovernmental education and health organizations work with CDC to develop model policies, guidelines, and training to assist states in implementing high-quality school health programs.

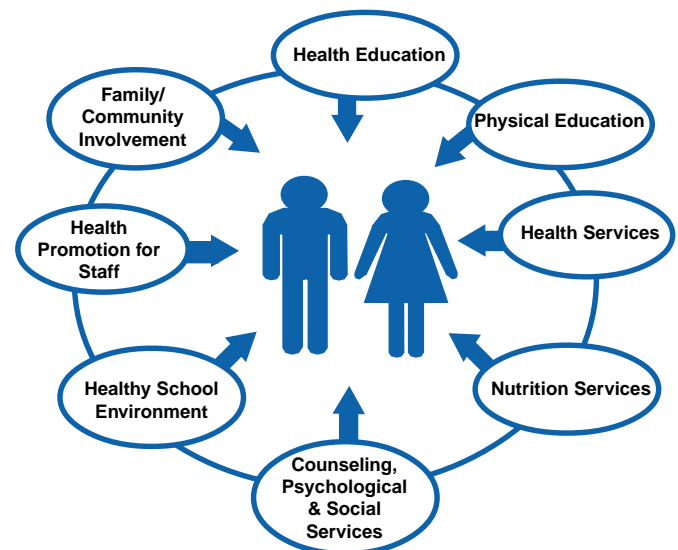
As part of this effort, CDC collaborates with scientists and education experts to identify curricula that have successfully reduced health risk behaviors among young people. CDC provides resources to ensure that these curricula, including training for teachers, are available nationwide for state and local education agencies interested in using them. Schools themselves decide which curricula best meet their students' needs.

### State-Based Programs

Through the established national framework and in collaboration with health and education partners, CDC assists funded states in providing young people with information and skills needed to avoid risk behaviors, including tobacco use, poor eating habits, and physical inactivity. The eight components of a coordinated school health program systematically

address these risk behaviors. In addition to receiving instruction, students practice decision-making, communication, and peer-resistance skills to enable them to establish informed and healthy lifestyles.

### The Eight Components of a Coordinated School Health Program



### Roles of State and Local Departments of Education and Health

CDC funding and support enables state departments of education and health to work together efficiently, respond to changing health priorities, and effectively use limited resources to meet a wide range of health problems affecting the state's school-aged population. With this support, state and local departments of education and health are able to

- Provide high-level staff in both agencies to coordinate, support, and evaluate local school health programs.
- Build a training and development system for health and education professionals at the state and local levels to improve policies and programs.
- Bring together organizations committed to improving the health of young people to develop and coordinate strategies for communicating the importance of school health programs.

## Success Stories From the States

The following examples from two of the funded states illustrate ways in which these states are helping to improve the health of young people.

**West Virginia.** The West Virginia Coordinated School Health Program developed Instructional Goals and Objectives for Health Education and Physical Education and trained more than 2,200 teachers to use the new framework. Results on the President's Physical Fitness Test in Clay County improved from a 20% pass rate in 1994–1995 to a 41% pass rate in 1997–1998.

**Michigan.** In response to its high rates of chronic disease and low rates of participation in high school physical education classes in the early 1990s, Michigan has taken the following steps:

- The Governor's Council on Physical Fitness, Health, and Sports established the Exemplary Physical Education Curriculum Project (EPEC) to develop and disseminate materials and procedures

that provide students with the fitness levels, motor skills, and knowledge they need to be active for life. Since February 1998, when EPEC lessons were published, approximately 800 elementary physical educators representing more than 53% of Michigan's school districts have received EPEC materials and completed training. Students taught with EPEC tend to have higher fitness test scores and higher self-reported positive behaviors than those not taught with EPEC.

- The Michigan State Board of Education unanimously approved a policy statement supporting effective learning environments that include daily physical activity. The policy directs Michigan schools to carry out such activities as offering daily recess periods or periods of physical activity for all elementary and middle school students and helping students and families make good health choices.

## School Health: Coordinated Efforts

### Surveillance Plays a Key Role

Since 1991, the Youth Risk Behavior Surveillance System (YRBSS) has provided information about the prevalence of health risk behaviors among young people. Developed by CDC in cooperation with federal, state, and private-sector partners, this voluntary system includes a national survey of about 15,000 students and smaller surveys conducted by state and local education agencies. The YRBSS focuses on priority risk behaviors such as tobacco use and provides vital information to improve health programs.

### Research Benefits Schools

National efforts for coordinated school health programs have been hampered by a lack of information on school health policies and programs. To address this need, CDC has conducted the School Health Policies and Programs Study, which provides valuable answers to specific

questions about school health programs at the state, district, school, and classroom levels. For example, although most schools have a written policy prohibiting tobacco use, only about half have a policy that bans all smoking in school buildings and on school grounds.

### Future Directions

Because every child needs sound preparation for a healthy future, school health programs should be established in all states and territories and the 25 largest local education agencies. In keeping with the goals of the nation's key national health planning effort, *Healthy People 2010*, extending the eight components of school health to all American children through coordinated school health programs will be the major focus of future efforts to improve the health of young people and the adults that they will become.

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